

**PATENT APPLICATION**

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the Application of

Masashi MIWA et al.

Application No.: 10/594,338

Filed: September 27, 2006

Docket No.: 129543

For: RARE EARTH MAGNET AND METHOD FOR MANUFACTURING SAME

**PRELIMINARY AMENDMENT**

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Please consider the following:

**Amendments to the Claims** as reflected in the listing of claims; and

**Remarks.**

**PATENT APPLICATION**

**OLIFF & BERRIDGE, PLC**  
Telephone: (703) 836-6400  
Facsimile: (703) 836-2787

Attorney Docket No.: 129543

**CUSTOMER NUMBER 25944**

**AMENDMENT TRANSMITTAL**

In re the Application of

Masashi MIWA et al.

Group Art Unit: 1773

Application No.: 10/594,338

Filed: November 14, 2006

For: RARE EARTH MAGNET AND METHOD FOR MANUFACTURING SAME

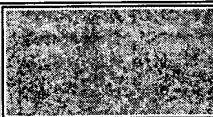
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

- ☐ Entitlement to small entity status is hereby asserted.  
☐ Small entity status of this application has been established.

Any additional claim fees have been calculated as shown below:

	(Column 1)	(Column 2)	(Column 3)	SMALL ENTITY			OTHER THAN A SMALL ENTITY	
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADD'L FEE	OR	RATE	ADD'L FEE
								
TOTAL CLAIMS	*84 MINUS	**51	=33	x 25	\$		x 50	\$1650
INDEP CLAIMS	*7 MINUS	***7	=0	x 100	\$		x 200	\$
<input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEP. CLAIM				+ 180	\$	OR	+ 360	\$
					\$			\$ 1650

\* If the entry in Column 1 is less than the entry in Column 2, write "0" in Column 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

The "Highest Number Previously Paid For" in this space (Total or Independent) is the highest number found from the equivalent box in Column 1 of a prior Amendment or the number of claims originally filed.

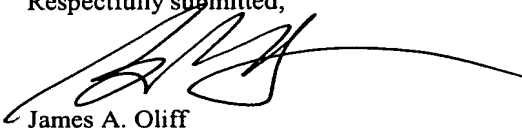
- ☒ Check No. 186148 in the amount of \$1650.00 is attached. The Commissioner is hereby authorized to charge any other fees that may be required to complete this filing, or to credit any overpayment, to Deposit Account No. 15-0461. Two duplicate copies of this sheet are attached.

11/17/2006 ATRAN1 00000104 10594338

02 FC:1615

1650.00 0P

Respectfully submitted,

  
James A. Oliff  
Registration No. 27,075

Stephen P. Catlin  
Registration No. 36,101

JAO:SPC/emt  
Date: November 14, 2006